

POSITION	ID NO.	DATE
CLASSIFIER	21	1/22/97
EXAMINER	Irby	2-3-97
TYPIST	452	2-5-97
VERIFIER	90	2/10
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

## INDEX OF CLAIMS

Claim	Date
1	1/22/97
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10	1/11/97
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SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Cancelled
- + Restricted
- N Non-elected
- | Interference
- ✗ Appeal
- O Objected

Claim	Date
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